

Best Ranger Challenge / Backing the MP Force / Supporting Adoptive Parents

The Official U.S. Army Magazine

August 2004

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Soldiers

2004
Going for
Olympic Gold

New Hot Topics
Pullout
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Team USA boxing coach SSG Basheer Abdullah is one of at least 16 Soldiers who'll participate in the 2004 Olympics in Athens.
— Tim Hipps

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• soldiersmagazine.com



NOWHERE does the phrase "taking care of its own" resonate more profoundly than it does with the Army's medical profession. Every day, day in and day out, medical professionals stand ready to provide their fellow Soldiers the care they need.

In a series of articles devoted to this special group of Soldiers and civilians, we share the stories of some of these professionals and their dedication to fellow Soldiers.

Every day each one of us represents the Army. Few of us get to do it on the world's largest athletic stage. Later this month several of our fellow Soldiers will do just that as they compete for the Olympic gold medal in Athens. See Tim Hipps' story on our Soldier-Olympians.

Also, to see another group of Soldiers excelling on a large scale in one of the Army's premier athletic events, don't miss Bridgett Siter's story on the Best Ranger competition.



In the April issue we told you about the Army's new safety campaign, "Our Army at War — Be Safe — Make It Home!" This has been successful in raising awareness and educating all of us on the need to reduce risk and stop accidents. This month we continue our coverage of this campaign with a special Hot Topics devoted to safety — read it, keep it, reproduce it and, most of all, use it.

Rob Ali
Editor in Chief



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Graphic Designer: LeRoy Jewell

Executive Secretary: Joseph T. Marsden

Printing: Gateway Press, Inc., Louisville, Ky

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2003



NAGC Blue Pencil
Competition
2004

Up-armored ... in Bosnia?

I RECENTLY came across a copy of the April issue of *Soldiers* and was shocked to see the photo on page 6. It showed a Soldier ground guiding a Humvee during a visit to a village in Bosnia.

What was shocking was that the Humvee he was guiding was up-armored. The Soldier was in BDUs and patrol cap, and the vehicle had no crew-served weapon.

With the Army being in daily combat in Iraq for over a year now, and in Afghanistan for two and a half, how is this possible?

You would think that this Humvee would have been swapped out for service in either of those combat theaters. We have Soldiers and Marines seeing action everyday with unarmored vehicles, and they're getting wounded or killed as a result. While an up-armored Humvee would not put an end to all those casualties, it would at least reduce them.

It appears from his attire and fairly casual demeanor that the Soldier in Bosnia is not facing the threat that those of us in Iraq and Afghanistan are. My question is simple: How many more up-armored Humvees are out there somewhere in noncombat areas, instead of being here, where they're really needed?

SSG D.C. Dempster
via e-mail

Just the Picture

I CAN'T tell you how excited I was to see the cover of the April issue — it featured a huge photo of our son, SPC Douglas Thomas, of Company B, 5th Battalion, 20th Infantry.

I needed to see his face, so bad, the day I saw the cover. I hadn't heard from him for a while and was getting worried.

Thank you! Thank you! Thank you!

I don't know how you picked that shot out of all the pictures I am sure

you had to choose from, but I am so thrilled you picked his.

Keep up the great work, and thank you again for choosing our son!

Mr. and Mrs. Vernonne Sloan
Via e-mail

2nd ACR Origins

I WAS reading the May issue and in the history section you had a small paragraph on the 2nd Armored Cavalry Regiment. It stated that the 2nd Dragoons were established in May of 1846. I think that this is incorrect; I am pretty certain, as a 2nd ACR trooper myself, that the regiment was formed in May 1836.

As a young Soldier in Germany with the 2nd ACR and now with them at Fort Polk, the pride we have in our past is second to none.

MSG Matthew T. Shoemaker
via e-mail

Oregon, Not Washington

ON page 43 of the June issue of *Soldiers* there is an interesting article mentioning a "Japanese Submarine" that shelled "Ft. Stevens, Wash."

I was so interested that I looked the information up on the Internet at www.portorfordlifeboatstation.org/article1.html. According to the information there, the Japanese submarine was the aircraft-carrying I-25. An aircraft from the submarine flew two bombing missions, shelled the mainland at Ft. Stevens, and sank two ships, all off the coast of Oregon, not Washington state, as your article states.

Witt Wittwer
via e-mail

Leadership and Responsibility

I SPENT 13 years as an active-duty military police Soldier, and am now a proud member of the Louisiana Army National Guard's 239th Military Police Company in Baton Rouge.

I'm not in any way condoning the actions of the military police Soldiers who apparently abused Iraqi prisoners.

But I am condemning their leadership, or lack thereof.


To hear a senior Army leader say he did not know what his Soldiers were doing really concerns me. Actually, it makes me pretty angry. We as leaders should never be so busy that we can't spare a few minutes each day or week to visit our Soldiers at their work places. We should be talking to them and seeing what's going on, how their jobs are going, and discovering whether they have any professional or personal problems that we should be assisting them with.

Some Soldiers are not cut out for certain types of work. That's why the Army has a variety of specific occupations. As leaders, we must train our Soldiers and evaluate their performance in whatever field they're in. If we can't get them up to the standard, then we should send them on their way and thank them for trying.

To hear one of the staff sergeants implicated in the Iraq scandal say he was just following orders and didn't know whether his actions were right or wrong drives me crazy, because it sounds like someone looking to save his own skin. If you don't know right from wrong, you don't deserve those stripes.

We all make mistakes. To err is human. Don't make excuses for your behavior, stand up and admit you made the mistake, take whatever punishment the chain deems necessary and move on.

SSG Robert Anglin
via e-mail

 For links to the Army News Service and Soldiers Radio Live, visit www.army.mil

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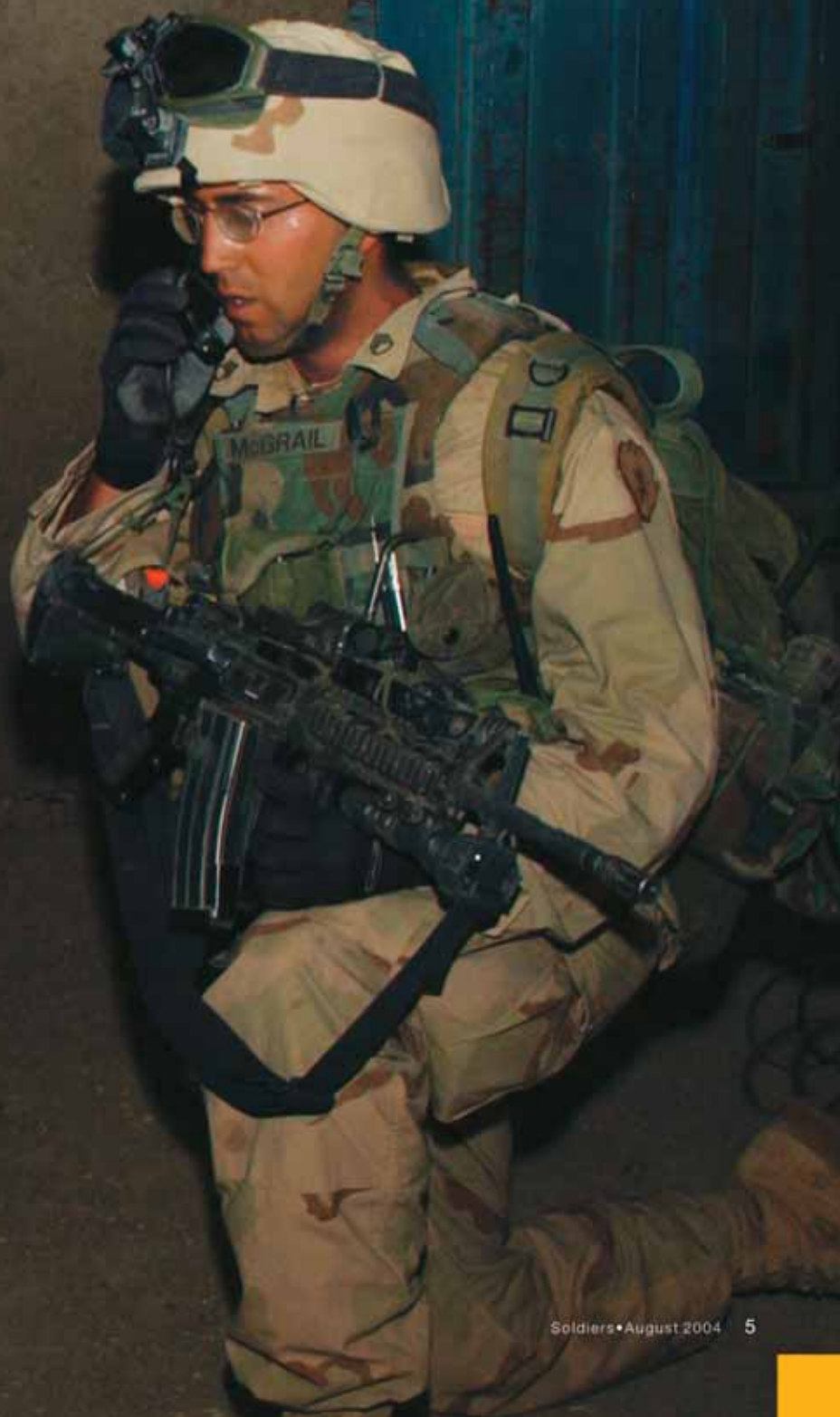




Afghanistan

Soldiers from the 25th Infantry Division establish security by clearing a compound in the Afghanistan town of Bathen before the sensitive-site exploitation team enters to search.

— SPC Gul A. Alisan





▲ Iraq

SFC James Fisher of the 96th Civil Affairs Battalion hands an activity book to an Iraqi child in Karacham village during a goodwill visit to the area.

— PFC Elizabeth Erste

► Honduras

Soldiers roll Humvees off the Navy's HSV-2 *Swift* at Puerto Cortes, Honduras, during a joint logistics over the shore exercise.

— Kaye Richey





◀ **Bosnia**

Two Stabilization Force 14 AH-64 Apache helicopters fly over the Bosnian countryside en route to Rijeka, Croatia, where they were prepared for shipment back to the United States.

— SFC Clinton Wood

▼ **Iraq**

SPC John Gurtler of the 55th Signal Company documents Task Force Olympia Soldiers fighting a fire caused by a mortar attack on Camp Freedom in Mosul, Iraq.

— SGT Jeremiah Johnson





Best Ranger Ch

"The object of Best Ranger is to stress them and push them to their very limits."

THE 2004 David E. Grange Jr. Best Ranger Competition wrapped up three days of grueling challenges, including the "Day Stakes" that included the infamous Prusik

Bridgett Siter is a member of the Bayonet staff at Fort Benning, Ga.

Climb and a surprise run-tunnel-shoot event.

With only 19 teams competing — compared to 50 in the past — this year's BRC was "specifically designed so there'd be no misconceptions about it being easier this time around," said MAJ Michael McNally, operations officer for the Ranger Training



Soldiers competing in the annual Best Ranger competition at Fort Benning, Ga., jump from a Black Hawk helicopter during the helocast/swim event.

allenge 2004

Story by Bridgett Siter
Photos by Staff Sgt.
Derrick C. Goode, USAF

Brigade, which hosts the annual event.

When brigade officials began planning this year's 60-hour event in summer 2003, they anticipated the presence of fewer teams because of the war on terrorism. Fewer teams could have resulted in spare time and opportunities for competitors to rest between events.

"The object of Best Ranger is to stress them and push them to their very limits," McNally said. "That's how you weed them out and identify the best team."

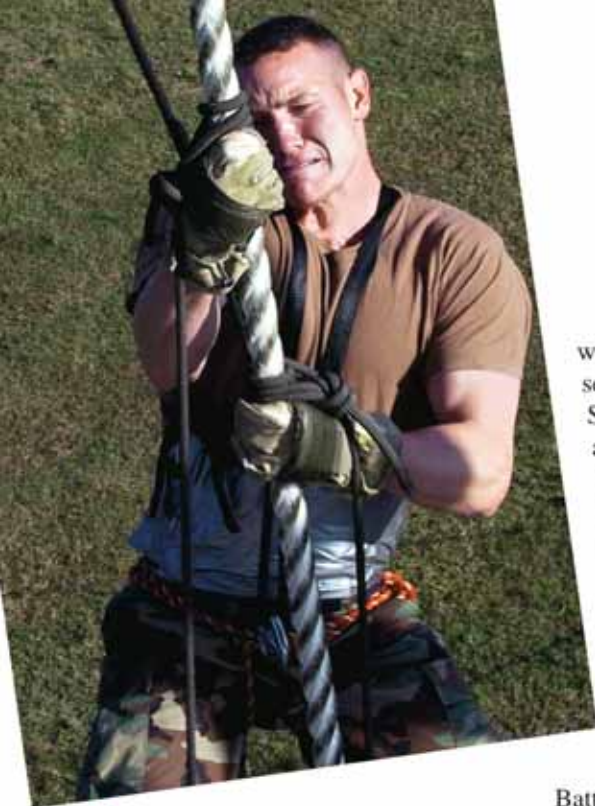
To that end, brigade officials devised individual events to be more difficult than those in recent history — no small task given the BRC's

reputation as a world-class athletic competition.

McNally believes they succeeded. "No one can say the winners didn't earn their titles this year," he said.

And if the degree of difficulty is the measure of this year's success, the 12 returning contestants agreed.

"It was a smoker. Everyone who



▲ CPT Paul Staeheli, a ranger from the Joint Security Area in Korea, climbs a tower during the competition.

had competed before agreed that the first day was the hardest," said SSG Adam Nash, referring to the day's back-to-back PT tests, eight-mile run and three-mile litter carry.

Nash and his 75th Ranger Regiment teammate, SSG Colin Boley, took first place in what some say was the closest competition ever.

With 752 points, Nash and Boley

"In my opinion, the best rangers are the ones who are deployed right now. They're number one in my eyes."

were only nine points ahead of the second-place team, SSG John Sheaffer and SFC Matthew Wilson, also with the 75th Ranger Regt. The two teams crossed the finish line together on the last event, the Buddy Run, in a show of solidarity.

"It's not about us getting first or them getting second. It's about bringing the title back to the regiment," said Nash, who finished fifth in 2002, when the 5th Ranger Training

Battalion took top honors.

The third-place finishers, the 4th RTB's CPT Corbett McCallum and SSG Jeffrey Lewis, scored 723 points and were the only team to land both competitors in the target area on the spot jump event. McCallum and Lewis had the fastest time on the Prusik Climb and the Day Stakes' run-tunnel-shoot event.

Nash and Boley went into the competition with two strikes against them. Tendonitis nearly sidelined Nash during the 18-mile road march, and Boley, one of 21 combat veterans in the competition, had no time to

prepare for the event. He returned from Afghanistan less than two weeks earlier, with no plans to compete.

"I'm not going to lie about it. Right now I'm wishing I'd never started," Boley said during a brief rest after the hatchet-throw event. "Right now I could be on leave."

Though Nash and Boley credit their success to each other, their wives, their coach, their unit — pretty much anyone and everyone other than themselves — the 4th RTB cadre responsible for manning each event said the duo used lessons learned from their experience in combat and past competitions to their advantage.

Nash and Boley "used their heads" when they used their pistol belts as a litter support, freeing their arms "to pump" during the litter carry event, said MAJ Kevin Brill. They passed two teams on that event, putting them in position to lead in the canoe event.

There, at the finish line, they dumped the water from the boat, donned their rucksacks and raced across the finish line.

"It's little things, like taking the time to dump the water instead of trying to pull the canoe with the water and their rucksacks in it," Brill said. "It's little strategies that make the difference, and that comes from experience."

Nash was hard-pressed to describe his feelings about winning Best Ranger. "I don't think it's sunk in yet," he said, but there's one thing he's certain about.

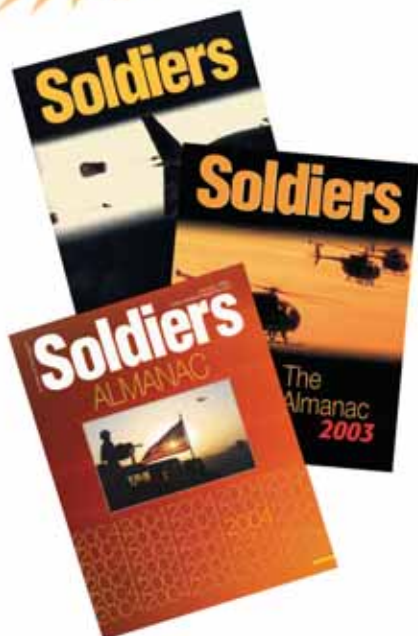
"We're not the best rangers," he said. "In my opinion, the best rangers are the ones who are deployed right now. They're number one in my eyes." 🇺🇸



◀ Rangers (from left to right) SSG John Sheaffer, SFC Matthew Wilson, SSG Colin Boley and SSG Adam Nash cross the finish line. Boley and Nash won the 2004 Best Ranger title.

IT'S YOUR TIME TO SHINE IN SOLDIERS' MOST POPULAR ISSUE

Soldiers is planning the January 2005 Almanac and wants your images for the "This is Our Army" section. Send us your candid photos of the Army family at work or play.



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YOU AND YOUR UNIT,
AND WILL MAKE
YOUR ARMY PROUD!

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OLYMP



CPT Anita Allen

MPICS

Going for Olympic Gold 2004

Story and Photos by Tim Hipps



At least 13 Soldiers and three Soldier-coaches will serve Team USA at the 2004 Olympic Games, Aug. 13 through 29, in Athens, Greece.



The Coaches

SSG Basheer Abdullah, head coach of Team USA's boxers; SSG Shon Lewis, one of three Greco-Roman wrestling coaches; and Army Reservist MAJ David Johnson, the rifle coach for Team USA; all bring their past experience to the games.

"I'm very excited about my selection as head Olympic boxing coach," Abdullah said. "I know I have a big challenge ahead of me, but I am looking forward to it. We have a lot of work to do after our showing in the 2000 Games, but I know that our Olympic staff and athletes will make the United States proud."

In boxing, Abdullah will be assisted by Anthony Bradley, a retired Army master sergeant and former Army World Class Athlete Program coach who handled Abdullah during his days in the ring as Byron Moore.

Lewis, a 10-time national team member and 13-time armed forces champion wrestler, has led the All-Army Wrestling Team to three of the past four national Greco-Roman championships and was twice selected as Greco-Roman coach of the year by

USA Wrestling.

"In order for me to get the coach of the year award, my team had to believe in me, and they had to accept my philosophy," said Lewis, whose wrestlers are stationed at Fort Carson, Colo. "So this really is just a reflection of my guys. It's all about trust. This is just a chapter in our lives, and it's going to be a very short chapter, but we're going to do it together — win, lose or draw."

Johnson has been a member of the U.S. National Rifle Team for 15 years. He competed in the 1992 Olympic Games in Barcelona, Spain, where he placed 11th and 21st, respectively, in air rifle and three-position shooting.

"The WCAP is important to me because I will be able to represent the USA in the Olympic Games as a coach," said Johnson, an infantry officer attached to the U.S. Army Marksmanship Unit at Fort Benning, Ga.



The Competitors

WCAP competitors slated to attend the Olympics include modern pentathletes CPT Anita Allen and 1LT Chad Senior, and Greco-Roman wrestler SGT Oscar Wood.

Allen was the first Army athlete to qualify for the Summer Games, a feat she accomplished by winning the women's modern pentathlon in the 2003 Pan American Games in the Dominican Republic.

Tim Hipps works for the U.S. Army Community and Family Support Center Public Affairs Office.

"I've always wanted to go to the Olympics, but I knew that in track and field and cross country I just wasn't going to cut it," said Allen, who ran cross country and track for the U.S. Military Academy at West Point, N.Y. "I just happened to be at the right spot at the right time and got introduced to the right people, and they made my dreams come true."

Modern pentathlon recreates the rugged days of old when an officer was brought down in enemy territory trying to deliver a message on horseback. After defending himself with a pistol and sword, the officer swam across a raging river, before running



MAJ David Johnson (left)

through the woods to his final destination.

Today, pentathletes fire 20 shots at 20 targets with a 4.5mm air pistol; fence in a 24-person round-robin event; swim a 200-meter freestyle race; ride a horse over a course with 12 jumps; and run a 3-kilometer race — all on the same day.

Senior, an infantry officer, finished sixth in the 2000 Olympics in Sydney, Australia. He was leading after three events when a skittish horse refused two jumps in the equestrian event, ruining his golden moment.

"I don't think the same thing can happen now; I'm a much stronger rider now than I was in 2000," said Senior, who returned to the sport after 18 months of soul searching following his heartbreaker in Australia. "I just hope I can have the same day in Athens that I had in Sydney, except for the ride. If I can fence as well as I did then, I'll feel pretty good about things."

Senior and Allen are attempting to become the first Army representatives to win Olympic medals in modern pentathlon. GEN George S. Patton was the first Soldier to compete in the event, when as a young lieutenant he attended the 1912 Games in Stockholm, Sweden. During the shooting competition one of his shots was ruled a miss, despite his conten-



SPC Regan Nichols

tion that the bullet had passed through a previous hole in the target. No evidence supported his case, however, leaving him in fifth place rather than clutching a gold medal.

For Wood, the Olympic berth is a dream come true.

"I've always dreamed of being an Olympian," he said. "But to be an Olympian and a Soldier, especially right now, makes it all that much better."

Oregon National Guard CPT Dan Browne, a former WCAP member, is also headed to the Olympics for Team USA. He won the berth by virtue of a third-place finishing time of 2:12:02 in the U.S. Olympic Marathon Trials in Birmingham, Ala., in February.

"I ran the race to make the team,



SGT Oscar Wood

"I've always dreamed of being an Olympian. But to be an Olympian and a Soldier, especially right now, makes it all that much better."

but I also ran it to honor my West Point classmates who died in Iraq," Browne said. "That kept me going with three miles left when my body was feeling pretty rough. I thought of them, and I knew I wouldn't quit."



The Shooters

Seven representatives of the USAMU at Fort Benning have also earned Team USA berths.

SFCs Shawn Duloher, Todd Graves and Bret Erickson will compete in shotgun shooting.

Duloher downed 25 consecutive targets in the final round to win the men's skeet competition in March at the U.S. Olympic Shotgun Team Trials at Fort Benning. Graves, a bronze medalist in the 2000 Olympics, finished in the runner-up spot behind Duloher. Four years ago, Graves became the first U.S. men's skeet shooter since 1984 to win an Olympic medal.

Erickson — two-time Olympian

who competed in 1992 in Barcelona, Spain, and 1996 in Atlanta, Ga. — finished in the runner-up position in March, behind fellow two-time Olympian Lance Bade of Colorado Springs, Colo., in men's trap shooting. One day later, Erickson won the double-trap competition, qualifying for a second event at the Athens Games.

Several other Army marksmen shot their way to Greece in the 2004 U.S. Olympic Rifle and Pistol Selection Matches held May 20 through June 3 at Fort Benning.

MAJ Michael Anti, a WCAP member, will compete in 50-meter prone 50-meter three-position rifle shooting. Reservist SSG Elizabeth Callahan, also attached to WCAP, qualified for 25-meter air pistol and 25-meter sport pistol.

Other members of the USAMU to make the Olympic shooting team include SFCs Jason Parker and Daryl Szarenski in air rifle and SPC Hattie Johnson in women's air rifle. SFC Charles Gartland will be Team USA's gunsmith.



Still Contending

In track and field, SGT John Nunn won the Milkeno Race Walk 20-Kilometer Championship in Lithuania in May, with an Olympic "A" qualifying and personal-best time of 1 hour, 22 minutes and 31 seconds.

On that day, Nunn and Air Force Capt. Kevin Eastler were the only Americans who had met the "A" standard, virtually assuring them of spots on Team USA, if they completed their races in



CPT Anita Allen

the July 2004 U.S. Olympic Track and Field Team Trials in Sacramento, Calif.

SPC Lakeisha Backus has met the Olympic "A" standard in the 100-meter race, as have SPC Milton Mallard, at 200 meters, and SSG Tonyo Sylvester, in the shot put.

SPC Michael Miller qualified for the Olympic Trials by winning the 1,500-meter race in the Oregon Preview Meet in Eugene, Ore. His 3:40.50 time in the Stanford Invitational in Palo Alto, Calif., in March, was one of five fastest times recorded by a U.S. runner this year.

Other strong WCAP contenders include SPC Regan Nichols in the 400-meter hurdles, CPT Ryan Kirkpatrick in the 5,000- and 10,000-meter races, CPT Michael Mai in the hammer throw, SPC Sandu Rebenciuc in the steeplechase and SPC Bevan Hart in the decathlon.

In other sports, CPT Matthew Smith is one of six rowing finalists for Team USA's lightweight four that will compete in Athens. 🏆



1LT Chad Senior

Backing the MP Force

Story and Photos by MSG Bob Haskell

SPC Michael Speed is about to become one of the new sheriffs in town. So are SPCs David Dillivan and Billy McCormick, and nearly 200 other Army National Guard artillery Soldiers from Tennessee who

MSG Bob Haskell is assigned to the National Guard Bureau Public Affairs Office and is a frequent contributor to *Soldiers* magazine.

in March joined active Army military police forces a long way from home.

The Soldiers, from the 2nd Battalion, 115th Field Artillery, have been reclassified as MPs after four weeks of nonstop training at Fort Leonard Wood, Mo., so they could fill the Army's need for a lot more MPs, in response to the war against terrorism.

The Soldiers — from the

battalion's batteries A and C — have left behind their 155mm howitzers so they can spend the next year protecting military families and installations in Germany and Hawaii — replacing active-duty MPs sent to Iraq and Afghanistan.

All told, nearly 1,000 Army Guard Soldiers from 10 artillery companies in Missouri, Illinois, Texas and Tennessee have earned their MP crests since November 2003.

Many staff sergeants and sergeants first class have spent an additional 17 days in basic and advanced NCO courses so they can lead at the company and battalion levels. Artillery officers have also been trained to lead MP Soldiers.

Soldiers in eight additional Army Guard companies from New Jersey, West Virginia, Minnesota, Montana, New Mexico and Arizona are expected to begin converting to MPs in October.

Upon completing MP training, the National Guard Soldiers are classified



▲ Tennessee Army National Guard artillery Soldiers sharpened their infantry skills at Fort Leonard Wood, Mo., while training to be military police.

► Convoy security was one of the most important skills the artillerymen-turned-MPs worked on during the training at Fort Leonard Wood.

as “provisional” MPs, because they’ll return to the artillery when their active-duty MP tours are over. While most of the Army’s new MPs learn about the MOS over a two-month period, the Guard Soldiers must learn it all in one month.

Their trainers are 70 Army Reserve Soldiers, including 53 who are part of the 2nd Bn., 100th MP Brigade, in Nashville, Tenn., who have been mobilized to train the Guard Soldiers.

The Reservists are under the active Army’s 14th MP Bde., commanded by COL Joseph Rapone II. About half of the training NCOs are civilian law-enforcement officers. Many of them became seasoned MPs during the Persian Gulf War, or while serving in such places as Panama, Bosnia and Kosovo.

The National Guard has 33 percent of the Army’s MP Soldiers, and the Army Reserve has another 23 percent, said LTC Starrleen Heinen, the MP School’s deputy assistant commandant for the Army Guard.

“The Guard will get another 13,370 MPs by 2011. We’re the active Army’s rotational force,” she said.

Converting the Guard Soldiers’ roles has meant a lot of hard work, some of the Soldiers said.

“It’s been tough cramming all of this into four weeks,” said Speed, while taking a break from a long afternoon of simulated combat at Fort Leonard Wood’s Military Operations in Urban Terrain village, where the Soldiers honed skills needed to fight in urban environments.

“I thought MPs just drove squad cars, worked the gates on Army posts and guarded enemy prisoners of war. I didn’t know they got right into the fighting,” Speed added. There have been many surprises for the Guard Soldiers as they have learned to handle themselves in garrison and on a battlefield, which all MPs are expected to be ready to do, said MSG Jeffrey



Pollard, a senior Reserve instructor and a civilian dog handler for the Tennessee Highway Patrol.

“We have to train them in all aspects of MP work because they never know what kind of duty station they’ll be assigned to,” Pollard said. “As far as we know, they’ll be assigned to garrisons in Germany and Hawaii. But you never know when they might wind up in Iraq.”

Law and order, internment and resettlement, maneuver-mobility support, area security and police intelligence are the five areas in which new MPs must have a fundamental knowledge, said LTC Randy Evans, the Reserve battalion’s commander.

The Soldiers’ final exam was a 36-hour tactical-operations exercise in the woods.

The condensed training has paid off, Rapone said. “The active-duty provost marshals at posts here and in Germany who are receiving these National Guard Soldiers tell me they are more than satisfied.

“Sure, we’d like more time to train them,” he said. “But if we weren’t comfortable that four weeks is enough to give them the fundamental skills, we would have said so a long time ago.”

“The instructors are great. They focus on the book, but they’re realistic at the same time, because they’ve performed the jobs they’re teaching us to do,” said Dillivan. “They tell us

what they would do if they were in a certain situation.”

“The Guard Soldiers begin to stand a little taller and to look a little sharper midway into the second week. That’s when they begin to think of themselves as MPs,” said the Reserve battalion’s CSM Bert Beckham.

Nobody wanted to quit by the end of week two, said Dillivan. “We’ve had guys battling sprained knees, bad ankles and the flu. They’ll do anything to get through this course.”

Completing the course and earning the crest could also open some career doors.

“I’m a construction worker,” Speed said. “But I’ve always wanted to get a job in law enforcement, maybe at the federal level, as a U.S. marshal. This course and the tour of duty in Hawaii will give me the experience to consider doing that.”



► Refresher training in fire and movement, camouflage and small-unit tactics were also on the curriculum during the conversion course.



Walter Reed Army Medical Center

On the Front Lines of Care

Story by MSG Lisa Gregory

LOYALTY, duty, respect, honor, integrity, courage, selfless-service — the Army values are etched in the pillars of the main entrance to the Walter Reed Army Medical Center.

The WRAMC staff practices those same values every hour of every day, said MG Kevin Kiley, commanding general of the North Atlantic Regional Medical Command and WRAMC.

Since Sept. 11, 2001, the staff at WRAMC has adjusted schedules to accommodate more patients, developed new treatment plans and created new programs for patient care. They've also looked within themselves and realized their focus is and always will be caring for Soldiers, Kiley said.

Speaking of the increased tempo caused by the influx of more than 3,000 Operation Iraqi Freedom patients, Kiley said: "It's been hard for all the staff members to see a young Soldier who's lost a limb or his eyesight, but they see these Soldiers and they say, 'This is our Army, and this is why I'm here, to care for them.' They didn't stop what they were doing before. They just stepped up to the added responsibility."

Kiley said that the WRAMC staff

has created many new initiatives to care for those wounded in combat.

"We anticipated injuries like the ones we're seeing, and I think the staff has learned a lot about the care that amputees require," he said. "Some of the staff members came to me and said they would need more space for therapy. An amputee working with a



prosthetic leg needs to be able to have space to walk, so today we have a temporary building and we're planning to build a new amputee center."

Family assistance is another service the staff provides. The Medical Family Assistance Center was established in April 2003 to coordinate the many resources available to injured service members and their families.

"The MEDFAC's mission is to provide compassionate, coordinated services to patients, next of kin and extended family members, with a

primary focus on those affected by missions in support of the global war on terrorism," said CPT Louann Engle, director of MEDFAC policy and development. "We meet every air-evacuation flight and explain the assistance that's available. Additionally, we are the first point of contact for family members of injured service members who come to Walter Reed. MEDFAC staff members also visit the wards and try to anticipate the needs of Soldiers and their families.

"Our goal is to assist the healing process by letting the Soldier know we're here to help in whatever way we can. Soldiers shouldn't have to worry about their finances or finding their families places to stay. Our staff can help with those needs," Engle said.

The hospital staff strives to ensure every patient receives the necessary care. Since the war on terrorism began, that mission has also extended to caregivers.

"We've had nurses deploy since 2001," said COL Patricia Saulsbery, WRAMC's deputy commander for

➤ At Walter Reed Army Medical Center in Washington, D.C., prosthesis Dennis Clark makes adjustments to a prosthetic leg to ensure a more comfortable fit for the Soldier who will wear it.



nursing. "And we knew that our staff would be affected by events just as much as would those who deployed to the frontlines. We knew we'd have to monitor schedules and take care of each other. We also knew we'd have to provide counseling for our own in order to get through this."

Saulsbery said that some members of the nursing staff had never seen the types of injuries suffered by Soldiers in Iraq and Afghanistan. This meant that current treatment plans had to be adapted to care for gunshot wounds, amputations or head injuries.

"It was difficult for the nurses at first. They had to learn to deal with a variety of medical disciplines to help with the patients' treatment."



MSG Lisa Gregory

"I arrived here a few months before the war started, and I expected to be dealing mostly with older patients with injuries or degenerative conditions of the back, knee or hip," said 1LT Bruce Kyllonen, a charge nurse. "Before the war we used specific treatment plans to deal with these common conditions. As the injured began arriving from Afghanistan and Iraq we faced a pretty big learning curve in terms of dealing with the major trauma we saw."

MAJ Tamara LaFrancois, clinical head nurse for WRAMC's Ward 57, said the staff anticipated the types of complex injuries they would be seeing and did everything possible to prepare for the demands those injuries would make on the nursing staff.

"The injuries were very complex compared to what we normally treat here. We began seeing more broken bones, soft tissue injuries, head injuries, nerve damage and a large increase in amputees," she said. "We put together a conference for the nurses to provide information that would help them handle these type injuries, and we made sure they had

◀ CPT Jon Verondi, a section chief for orthopedics in Walter Reed's Occupational Therapy Clinic, explains proper wrist exercises to patient Mercedes Nelson during a follow-up appointment.

Answers for the Disabled

By Joe Burlas

SEVERELY disabled Soldiers and their families can now find answers to service-related questions through the Disabled Soldier Support System, or DS3.

The single information source provides information about entitlements and services. The program is intended to ensure that severely disabled Soldiers don't lose the Army's support after being medically retired, said Acting Secretary of the Army Les Brownlee. "These Soldiers have performed an enormous service for the nation," he said. "They go on living, but their lives are significantly

changed. They may have lost an arm, leg or eye, but they have not lost their courage."

For program purposes, severely disabled means a disability rating, or the likelihood of a rating, of 30 percent or greater, and a special condition. The condition can include the loss of an eye or limb, a spinal cord injury or disfigurement, or a psychiatric disorder. The disability rating and special condition do not have to be combat-related. While Soldiers or their family members can call for assistance at any time, program officials will contact disabled Soldiers periodically for at least five years following registration in the program.

"This program is designed to be the advocate for the Soldier and his family," said COL Michael Flowers, director of the Human Resources Policy Directorate at the Pentagon. SGT James Sides, a medic who suffered multiple brain bruises, a broken arm and internal injuries in a helicopter crash, credited the program with keeping his family together.

His wife, Rebecca, had to make a lot of tough decisions alone when Sides was recovering from his injuries.

One of those decisions was whether to take Sides off life support when he was in a coma and not expected to survive. Other decisions included how to make the move from their Fort Carson, Colo., home to Wynne, Ark., when Sides was medically retired. Other questions included where to get mar-

Joe Burlas is with the Army News Service.



▲ Teaching Soldiers to use their prostheses for a range of daily activities — including Foosball — is one of the many missions of Walter Reed's Occupational Therapy Clinic.

the equipment they needed.

"It was difficult for the nurses at first. They had to learn to deal with a variety of medical disciplines to help with the patients' treatment," she said. "Early on, we had nurses work longer hours to give some continuity for the patients, but we've been able to go back to a regular schedule that allows people away from the ward."

LaFrancois said staff members were later encouraged to seek psychiatric counseling to help them cope

with the psychosocial aspects of dealing with the new patients.

Kyllonen said staffers benefited from working repeatedly with the same group of people and performing the same mission, because they each had someone they could talk to. "We worked as a team, and I think we've grown a lot closer than most groups of co-workers do because of what we're dealing with."

Continuity in patient care, especially for those wounded in combat

operations, isn't limited to the nursing staff. The team approach is equally important, for example, when it comes to rehabilitation, said LTC Jeff Gambel, chief of the Amputee Clinic.

"This, along with the patient's input, helps the doctors, nurses, therapists and other team members determine realistic goals for the patients to achieve," he said. "The team concept is central to physical rehabilitation, and we have had to change our in-patient and clinic operations a little to accommodate the number and special needs of the returning wounded."

Gambel said the biggest changes made in the clinics were intended to accommodate amputees.

"It was important for us to have a plan in place. You have to be ready to begin building limbs for amputees after the surgeons are done," said Ralph Urgolites, director of orthotics and prosthetics.

Urgolites said that before the war he could work directly with a patient to determine the most appropriate prosthetic for the individual, but now it's harder to do that. "We always consider a Soldier's expectations for

riage counseling and counseling for their two children who were having difficulty accepting the changes in their father's life.

"I contacted the Department of Veterans Affairs and didn't get the answers I needed," Sides said. "I contacted DS3 and got what I needed."

SFC Joseph Briscoe, who lost his right arm below the elbow and suffered damage to his left arm due to wounds he received in Iraq, said DS3 helped him understand how he might be able to stay in the Army. "I want to see it through to a normal retirement," said Briscoe, a 17-year Army veteran.

Briscoe said he was briefed on his options — medical retirement or working to meet the standards for a Medical Fitness Board, which might allow him to stay in the

Army — shortly after he arrived at Walter Reed Army Medical Center, while in a haze from the pain medication he was taking.

"Somebody checked the block that I got the briefing," Briscoe said, "but I really don't remember what was said."

When DS3 officials made initial contact with Briscoe, he asked for information on his options and got it.

While the program's initial focus has been on operations Iraqi Freedom and Enduring Freedom, it is not limited to Soldiers from recent conflicts, Flowers said.



For more information about the initiative, visit the DS3 homepage at www.ArmyDS3.org.



◀ 1LT Justin Laferrier, a physical therapist, discusses therapy options with SSG Roy Mitchell of Fort Drum, N.Y.

using the new limb before we even build it," he said.

"I'm working with a Soldier now who lost his sight and one arm, and who's other arm is immobile, so I spent a lot of time thinking about what I could do for him," Urgolites said. "And he told me he just wanted to be able to hold a cup of coffee on his

own. That's when I realized how hard this job can be. It's not our expectations as doctors, but the expectations the patients have that are most important in their rehabilitation."

"Working here is like a double-edged sword," said CPT Jon Verdoni, section chief for orthopedics in the Occupational

Therapy Clinic. "As therapists this is our job and we're eager to help, but the other side of that is that we don't want to see fellow Soldiers coming in here with these types of injuries."

Verdoni said the biggest reward of his job is watching Soldiers work through the emotional stages of losing a limb and eventually leave the

hospital walking on their own and thanking the staff for their help.

"The real therapy begins with the behind-the-curtain issues — what they're feeling," he said.

For SPC Harvey Naranjo, who works in the Amputee Rehabilitation Clinic within the Occupational Therapy Clinic, patients are friends and peers.

"I love my job here. We train the patients on how to use their prosthetics so they can get up and go again," he said. "I actually live with some of the Soldiers here for out-patient care, and we all seem to have the same Soldier mentality. It's hard watching them struggle sometimes, but it's great to see them outside the hospital, participating in field trips and other events."

While the Occupational Therapy staff is teaching patients to use their prosthetics, the Physical Therapy staff is making sure the patients' recently injured bodies are conditioned.

"When the war started we knew we'd have to do everything possible to maintain our staff-to-patient ratio in order to care for both the returning wounded and our regular patients," said LTC Barbara Springer, assistant

Homes for Troops

By Donna Miles

CONCERNED about the welfare of troops returning home with disabilities from the war on terror, a new nonprofit group is raising money to build houses adapted to their needs.

Homes for Our Troops is the brainchild of John Gonsalves, a construction supervisor from Wareham, Mass., who said he was struck by television news accounts of a Humvee driver in Iraq who lost both legs during a rocket-propelled grenade attack. "I remember watching that and wondering,

"What happens to him from here?" Gonsalves said.

He said that news story inspired him to volunteer his services to an organization that builds houses for disabled troops — but he couldn't find one. "That planted the seed for Homes for Our Troops," he said. "I knew that if I didn't get a group together and try to do this, it would haunt me the rest of my life."

When he launched Homes for Our Troops, Gonsalves said he "knew nothing about nonprofits, but I did know how to build a house." He'd built houses adapted for people with special needs, incorporating ramps and other features.

"Feedback has been phenomenal," said Gonsalves, who said he has received donations from all over the United States.

He encourages donors to give, regardless of the amount. "It doesn't have to be a large amount. It all adds up," he said.

"The war on terror is something the American people should all be a part of — not just the people on the front lines in Afghanistan and Iraq," Gonsalves said. "We have a responsibility to do more for our veterans who are out there fighting every day and putting their lives on the line."

To make a donation
write to



Homes for Our Troops Inc.
P.O. Box 615
Buzzards Bay, MA 02532

Donna Miles is with the American Forces Press Service.

Motivating Fellow Amputees

By SGT Lorie Jewell

LOSING part of his right leg below the knee has made CPT David Rozelle more determined than ever to be the kind of leader who motivates Soldiers by example.

Rozelle was injured in a land mine explosion in Hit, a city in western Iraq. Following a period of rehabilitation during which he was fitted with a prosthetic foot, Rozelle was cleared by a medical board to remain on active duty. He now commands a 3rd Armored Cavalry Regiment headquarters troop.

An expert skier before the explosion, Rozelle returned to the slopes during a ski clinic sponsored by Disabled Sports USA. He skied again at the National Disabled Veterans Winter Sports Clinic. Both events were held in Colorado.

With his natural foot planted on one ski

and his prosthesis alternately jutting to the front, side and back, Rozelle made several runs from the top of a mountain. Besides proving to himself that an artificial foot won't hold him back, Rozelle gets deep satisfaction from watching other Soldiers successfully maneuvering on the slopes.

"It's a confidence builder," Rozelle said. "You're looking at a bunch of guys who have had to relearn simple tasks like bathing and shaving. You bring them up here, put them on the mountain and show them what they can do. They come away saying 'If I can do this, I can do anything.'"

Rozelle believes the combination of having a command position and a prosthetic foot gives him a unique opportunity to help Soldiers on a whole new level. He has made repeated trips to Walter Reed Army Medical Center to visit wounded Soldiers.

"I want to give them someone to talk to who has made it through what they're fac-

ing, let them ask questions, and have them see me walking," Rozelle said.

He also shares his experience in getting in shape and navigating the medical-board process. He passed a physical-training test by swimming 800 yards in less than 20 minutes, an alternate event for the run.

Rozelle sees sports as a form of therapy for Soldiers like himself. He is working to establish an amputee support group at Fort Carson, Colo.

The group will not only focus on networking Soldiers who have prostheses, but also getting them involved in outdoor sports, Rozelle said. Colorado has abundant opportunities for skiing, mountain biking, hiking and river rafting, he said.

Eventually, Rozelle intends to expand the group Armywide. He invites anyone with an interest in participating or supporting the group to contact him via e-mail at david.m.rozelle@us.army.mil.

chief of Physical Therapy Services. "The command has really been supportive. We routinely work long hours here, but the patients' motivation has really kept us going."

MAJ Mary Kay Hannah, a staff therapist, said that it's not just the hours the staff puts in, but the types of injuries they're dealing with.

"It's hard some days, even when you watch a patient do a little more each day. You still remember what the person looked like initially," said Hannah. "I still sometimes wake up in the middle of the night thinking about some of the patients. It has deeply affected me."

Springer said that command-sponsored discussion groups and other initiatives continue to help staff members cope with the extra workload

and deal with they're own feelings.

Kiley is proud of each of his staff members.

"Working here is truly a full-time job, both intellectually and emotionally," he said. "The staffers here are so dedicated, I'm sure that if you asked

them what they wanted from me, it wouldn't be a day off, or recognition. They would ask for more resources and funding to better take care of the Soldiers and their families that come here. That's selfless-service, and that's why they're here." ❧

► Occupational therapist 1LT Marianne Pilgrim sizes the wrist of SGT Romain Parker of Company G, 104th Aviation Brigade, so he can be fitted with a new splint.



MSG Lisa Gregory



Caring For Our Own

The Last Ocularist

Story and Photos by Michael E. Dukés

IN the back of Walter Reed Army Medical Center's ophthalmology clinic is a shop few know about. A master craftsman called an ocularist works there. On any given day the sound of a tiny brass hammer hitting steel plates echoes slightly outside his door. When the ocularist is in, his door is never closed.

As the only ocularist in the Department of Defense and one of fewer than 100 in the country who can make prosthetic eyes, Vince Przybyla might be considered by some people as an endangered species.

He has been at Walter Reed, in Washington, D.C., making eyes since he was drafted in 1967 during the Vietnam War. After his military obligation was up, Przybyla decided to stay at the hospital as a civilian.

He's never kept track of how many Soldiers and other service members he's helped; they are more than just statistics to Przybyla, who studied art in college.

He doesn't rely on technology to help create his masterpieces, he uses skills passed on by a master craftsman before him. These specialists don't attend a school to learn their trade. The only way an individual can become an ocularist is through an apprenticeship.

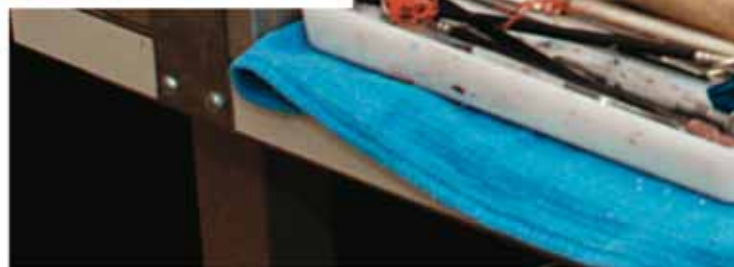
Przybyla has no apprentices, though. He's a one-man operation, and seldom has an idle minute. Each month since the global war on terrorism began, Przybyla's workload has increased by as many as three to five new patients who have suffered injuries related to Operation Iraqi Freedom.

The prosthetic eyes that he makes are almost indistinguishable from an individual's original eyes. And his patients almost always leave smiling, Przybyla said.

At first glance, SGT Gary Boggs couldn't tell the

Michael E. Dukés writes for Walter Reed's *Stripe* newspaper.

➤ SGT Gary Boggs looks on as Vince Przybyla puts the final touches on Boggs' new prosthetic eye. In the inset photo, Przybyla uses red thread to add lifelike blood vessels to the eye.







◀ Przybyla uses wax shaped like Boggs' remaining eye to make an impression of the Soldier's socket to ensure the final prosthesis fits properly.

difference between his real eye and the prosthetic one he tried on.

"This is great," said the Ohio National Guard Soldier, who was activated to serve with the 4th Infantry Division in Iraq, where he was injured.

Boggs just wants to look normal again.

"Now people won't know I'm missing an eye unless I tell them," he said with a confident smile.

Contrary to popular belief, prosthetic eyes are not spherical and made of glass. They are more like a slice from an apple, about one third of a sphere, and are made of medical-grade acrylic.

An Army dentist developed the modern prosthetic eye during World War II, after Germany cut off its supply of glass eyes to the United States. Initial development of the eye was performed at Walter Reed and Valley Forge Army hospitals. Ocularists across the country still refer to it as the "Walter Reed eye."

Before someone is fitted for a prosthetic eye, an ophthalmologist specializing in ocular prosthetics

places an implant into the patient's eye socket. If muscles are still present, they are attached to the implant. This enables the prosthetic eye to move in sync with a patient's good eye.

After a patient's swelling has subsided, Przybyla begins creating a custom prosthetic eye. It's a process that usually takes four to five days.

Przybyla paints a thin plastic disk, smaller than a dime, to match his patient's iris color and pattern. Next it is coated and dried in an oven. Then he repeats the process. "This creates a three-dimensional effect," Przybyla said.

Over the next few days he takes impressions of his patient's eyes and creates plaster casts to mold the scleral shell. When he removes the prosthesis from the oven and grinds off the rough edges and smooths the shell, it's ready to be tried on.

Once satisfied with the fit, he begins the next stage of painting. He

▶ Boggs' prosthetic eye matches his other eye. After wearing their prosthesis for a few days, Soldiers get any needed adjustments.

recreates tiny blood vessels, slight yellowing in the corners, and adjusts the white to match the shade of his patient's good eye.

Throughout the painting process, his patient sits on the other side of his workbench, captivated by his meticulous attention to details. After the final details are completed, Przybyla dries the eye overnight.

The next day, he shows the patient how to insert, remove and clean the eye. Then he looks into the patient's eyes. When he's sure he has the patient's attention, he asks him if he's going to wear eye protection from now on. The patient usually answers, "Yes sir."

At the end of the day, after sending another Soldier on his way with a new eye, Przybyla turns off his lights and goes home. Thoughts of his patients linger in his head. "What's going to happen to these kids when I'm not here anymore?" he asks himself.

His concern brings him back year after year, passing up retirement time after time. He's been at Walter Reed for almost 40 years. Today the ocularist is the last of his kind. When he's gone, his workshop will be empty. ❧





Amputees Battle Back

Story and Photos by Dr. (MAJ) Jeffrey C. Leggit

ON Sept. 14, 2003, in Fallujiah, Iraq, PFC George Perez, an infantryman in the 82nd Airborne Division, participated in a mission to escort three 3rd Infantry Div. tanks out of the city.

Perez was traveling in the back of a Humvee with six other Soldiers, among them his best friend, team leader CPL Trevor A. Blumberg. Perez's squad was to take up a position on one side of a road. As his vehicle turned around to move into place, a remote-controlled improvised explosive device exploded next to it.

The attack added Perez to a list of more than 9,000 Soldiers wounded in Iraq since Operation Iraqi Freedom began in March 2003, according to Central Command officials.

Perez vividly recalls the nightmarish event.

"I was thrown, and I can still see myself floating in the air," he said. "There was total silence, due to the deafening sound of the explosion." Soon after, he hit the ground.

"I felt no pain, but I knew I must

Dr. (MAJ) Jeffrey C. Leggit is with the Center for Army Lessons Learned at Fort Leavenworth, Kan.



▲ Physical therapy is a large portion of the amputee-rehabilitation process. Here a Soldier practices using a below-the-knee prosthesis.

The Army Medical Department is totally committed to returning amputees to military service, if that's where they want to be.

be hurt because there was blood dripping down my face," he said. "I saw weapons fire from across the road and from members of my unit. 'We must be under attack,' I thought."

Perez knew he needed to react. But when he tried to move, he couldn't. That's when he saw that his foot had turned 90 degrees and folded up beside his knee.

His unit was apparently under fire from the same insurgents who had detonated the IED.

"I kept asking about Blumberg, but nobody would tell me anything," Perez said. Finally, Perez was told that no one could find Blumberg. He had been killed instantly. At that moment, Perez reeled from the physical and emotional pain he felt.

Moments later medics evacuated him to the company aid station. Less than two hours after the attack — after being stabilized — he was evacuated to a combat-support hospital where he underwent the first of multiple surgeries. Two of his toes were amputated and an external fixation

device, a wire cage on the outside of the leg secured with pins, held his fractured bones together. The Army medical system was there for Perez that day.

Two days later he was evacuated to Landstuhl Regional Medical Center in Germany, where another of his toes was removed because gangrene had set in. He still had hope that his leg could be saved. Perez was evacuated to Brooke Army Medical Center in San Antonio, Texas, and underwent several more surgeries. The gangrene spread and doctors said there was little hope of saving the lower limb.

Perez was told that he'd lose his leg — maybe even his life — if the gangrene continued to spread. Doctors decided to remove his leg just below the knee.

Perez underwent several more surgeries to control a deep thigh infection, followed by skin-graft procedures. He spent a week in the intensive-care unit as he recovered from his infections. Besides the below-the-knee amputation, Perez

suffers severe hearing loss in his left ear, shrapnel wounds in both arms, large scars on his left and right legs, and deep psychological wounds.

Yet he considers himself lucky. Joseph Miller, chief prosthetist at Walter Reed Army Medical Center in Washington, D.C., said amputees with a below-the-knee amputation generally return to 70 percent of their pre-injury level of activity, compared to 20 percent for above-the-knee amputations.

Miller said amputation sometimes actually improves the Soldier's chance of recovery, as in Perez's case, because trying to save the leg would have required countless surgeries, prolonged recovery time and increased risk of infection.

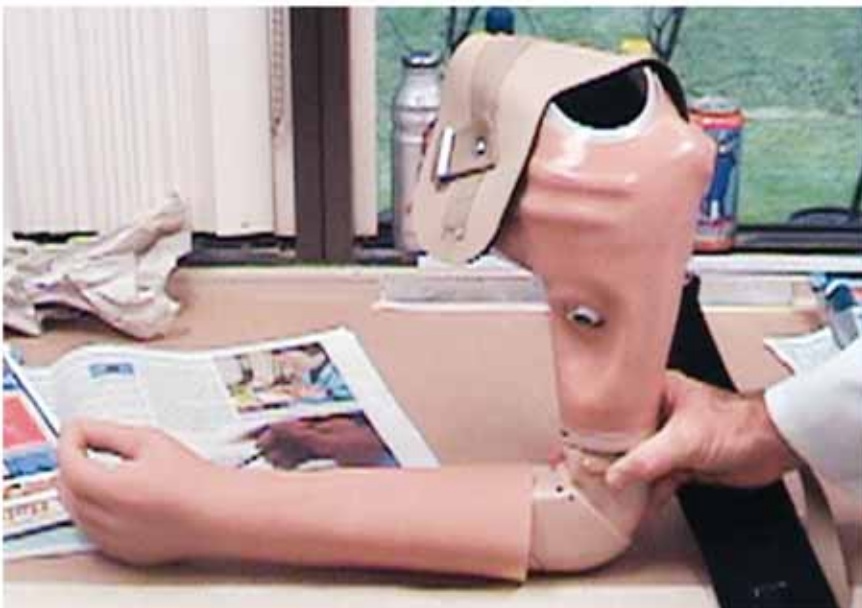
Perez received his first prosthetic leg about eight weeks after his injury. He has learned to use it, with the help of daily physical therapy. He expects to receive a more advanced prosthesis in the near future. The new device will require him to expend less energy walking and running.

Meantime, Perez still suffers some phantom limb pain where his leg used to be, but it's manageable, he said. Military medicine treats this pain with aggressive early management, which can help minimize or abolish the pain altogether. He remains upbeat.

This is just one more of the many hurdles he must overcome, said Perez, who wants to stay in the Army though he realizes he may not return as an infantryman.

The Army Medical Department is totally committed to returning amputees to military service, if that's where they want to be, Perez said. If

◀ Upper-extremity amputees usually receive three different prostheses, each for a different purpose. This prosthesis is an above-the-elbow design.





▲ Joe Miller, Walter Reed Army Medical Center's chief prosthetist, examines two prosthetic legs, a shorter one for a below-the-knee amputee and a longer version for an above-the-knee amputee.

that means making new devices so amputees can handle the increased workload, so be it.

The Army is at the forefront of prosthetic care, because Soldiers are demanding more from their new limbs than amputees have in the past, Miller said. Such is the case with SGT Charles Bartles of the 418th Civil Affairs Bn.

Bartles lost his right arm above the elbow to a remote-controlled IED in Baqubah, Iraq.

The Reservist from Kansas was offered the opportunity to continue his rehabilitation at home. He declined.

"I have friends who have left WRAMC to finish their rehab," he said, "and they are sorry they did. The guys here know Soldiers, and they take care of them. The other thing is, I like being around other Soldiers who have been through what I have been through."

Bartles will receive three different upper-extremity prostheses all at once — cosmetic, body-powered and myoelectric. This last prosthesis works by

embedding electrodes in muscles and then firing the muscle with the electrode to work the artificial limb.

Military medicine is the first to offer upper extremity amputees all three prostheses at once.

"The requirements that Soldiers have has spurred new innovations in prosthetic care," said John Miguez, clinical director for upper-extremity prosthetics at WRAMC.



▲ This myoelectric prosthesis is controlled through electrodes embedded in the amputee's working muscles.

"The Soldier determines the level of function he will achieve. We're charting new territory and pushing industry to make products that stand

up to the Soldier's demands," said Charles Scoville, director of the Center for Amputee Excellence at WRAMC.

A multidisciplinary amputee clinic of orthopedists, physical medicine and rehabilitation physicians, physical and occupational therapists, psychiatrists, prosthetists, social workers and nurse-case managers cares for each Soldier. This team, along with the Soldier, makes collective decisions regarding the type of devices offered and the extent of treatment.

Still, there are many significant barriers for returning amputees like Perez.

"I get lonely," he said. While he is in Texas continuing rehabilitation, his family is in North Carolina. He's uncertain about how his friends will receive him after his treatment, and he continues to have occasional bad dreams about the attack. However, through it all, he remains optimistic. He's proud to be a Soldier; he's proud of his unit and proud of what the military is accomplishing in Iraq. ■



Caring For Our Own

Brooke Army Medical Center

Each One a Hero

Story and Photos by SFC Alberto Betancourt

THE doctors and nurses at Brooke Army Medical Center at Fort Sam Houston, Texas, say heroes walk the hallways of the facility's fourth floor — the U.S. Army Institute of Surgical Research's Burn Center.

"A burn is one of the most traumatic, demeaning and dehumanizing injuries a person can suffer," said LTC Alfredo Montalvo, the Burn Center's psychiatric clinical nurse specialist.

"But the patients here at the Burn Center inspire me. They're not ashamed of their injuries," Montalvo said. "When people stare at them, they say, 'Go ahead, ask me what happened. Yeah, I was in Iraq and got burned.' They wear their scars like red badges of courage."

SGT Josh Forbess of the 101st Airborne Division's 1st



▲ The Occupational Therapy Rehabilitation Ward at Brooke Army Medical Center at Fort Sam Houston, Texas, stays busy with both burn patients and those suffering from muscular or skeletal injuries.

► The Burn Center at Brooke AMC — the Department of Defense's only such facility — has been a leader in the development of innovative and effective treatments for burn victims.





Battalion, 320th Field Artillery, has been at the Burn Center since November. He's one of almost 100 patients from Operation Iraqi Freedom who were admitted to the center. Forbes was seriously burned when his helicopter went down in Mosul. Despite injuries that prevent him from completely closing his eyes, he is an inspirational spokesman for other patients.

"I know what they're going through," said Forbes. "I want to make sure they understand that no matter how bad it is, they can recover from it."

Forbes said he doesn't know where he gets his strength. But those who witness his positive attitude, watch him work hard during rehabilitation therapy and listen to him say he wants to get back to the Soldiers he deployed with so he can do some work, are awed by his determination.

"Never say quit — never say die," he said. "The key to recovery is understanding that the staff wants to help, but you have to help yourself."

CPT Travis Hedman, chief of physical rehabilitation at the Burn



Center, said burn scar tissue is a tough adversary because it causes a lot of pain that can be devastating to the patient and result in emotional setbacks.

"The pain can cause patients to not be as compliant as they need to be when they exercise," he said. "Additional pain medication may be necessary just to allow the patient to deal with rehabilitation."

Hedman said therapists can work with a patient all day to improve his range of motion, only to find the next morning that the patient had maintained an unfavorable position all night and must begin again "at square one."

That's why specialists in each field regularly question each patient on the nature and extent of his pain.

"From the physicians and nurses to the rehabilitation staff — which includes both occupational and physical therapists — everyone needs to know what's going on with the burn patient," said Hedman. "Any change in the patient could affect each therapist's approach to treatment."

SPC Gabriel Garriga, of the Illinois National Guard's 333rd Military Police Company, said he joined the Army shortly after the 2001

▲ Deep-scar massaging is a part of the rehabilitation process for burn patients who also suffered a muscular or skeletal injury.

terrorist attacks partly out of patriotism and partly out of anger.

Garriga and his unit were part of the initial attack on Iraq, and after four months in country he was injured while manning a checkpoint. He was admitted to the center with severe burns over most of his body.

Twenty-three surgeries later, Garriga said he feels good compared to the eight months he spent in bed with terrible pain. He also said he's tremendously grateful for the treatment he's received at the Burn Center.

"It was very difficult when I saw him the first time," Garriga's mother said. "He was swollen, his hands looked like charcoal and if his intestines had not been removed they would've crushed his heart and lungs."

Although Garriga said he feels pretty good now and has had a chance to go home and visit friends, something is bothering him.

"I wish I was still there with my unit," he said. "I don't feel good about being here in the States while they're still fighting in Iraq."

He said that at first the extent of his injuries caused him to ask "why me?" But the anger subsided quickly.

"I know other Soldiers have gone through similar pain in other wars," he said. "I'm very proud that I went to



▲ SGT Josh Forbes of the 1st Bn., 320th FA — one of about 100 Operation Iraqi Freedom burn patients at the center — exercises on a cross-trainer machine to help get flexibility back into his arms and legs.

History of Care

THE U.S. Army Institute of Surgical Research's Burn Center at Fort Sam Houston is the Department of Defense's only burn center.

Operational since 1949, it was only the second burn center in the nation at that time and one of the few burn centers in the world, said LTC Leopoldo Cancio, the center's director.

During World War II burn injuries were handled by an organization known as the surgical research unit. After the war that agency was moved from New York to Fort Sam Houston.

After the war the center became involved in such other combat-casualty-care related problems as the use of blood products.

However, with the onset of the Cold War many military and medical experts were concerned that the country could be faced with a lot of burn casualties should there ever be a nuclear war, so the center began focusing on burns, Cancio said.

The center has participated in and led the way in many developments of modern burn care in the United States.

"We developed the burn recess citation

formula for intravenous fluids and the effective topical burn creams to prevent burn-wound infection," he said. "We also defined the nutritional needs of burn patients, and developed new types of mechanical ventilation to help those who've inhaled smoke."

Besides treating military personnel, the center serves civilians in the South Texas region.

"The civilian patients allow us to maintain our ability to take care of wartime casualties," said Cancio. "During peacetime, military patients are only a fraction of our daily workload." — *SFC Alberto Betancourt*

Iraq and did everything I had to do for my country. I have no regrets, and I'll go back if I have to."

Garriga's mother said she's proud of her son and of all the Soldiers and parents who've been supporting their children involved in this war.

"Both of my sons joined the

military after Sept. 11," she said. "I'm very proud. I'm also very grateful and thankful to everyone at the Burn Center for helping my son live."

Meanwhile, inside his small office, Montalvo reviewed his notes from the day's rounds and repeated how proud he is of the burn patients.

"My appreciation for the simple things in life has increased," he said. "We take so many things for granted — the ability to breathe without a tube in your throat, the ability to talk, or dress or bathe. The strength and courage of these Soldiers inspire me. Each one of them is a true hero." 🇺🇸



▲ 1LT Kimberly Knoll, an orthopedic therapist, removes the bandages from SPC Gabriel Garriga's hands as his mother, Giselle, looks on.

Sharp Shooters

ON March 26, 2003, during Operation Iraqi Freedom, the U.S. Southern European Task Force's 173rd Airborne Brigade conducted a parachute assault into Northern Iraq. More than 1,000 paratroopers jumped into Bashur Airfield in a historical and critical mission called Operation Northern Delay.

During its year-long deployment to Iraq, the brigade also conducted multiple operations leading to the capture of many Ba'ath Party officials and the seizure of thousands of enemy weapons and explosives. Here, SFC Todd Oliver from SETAF and SPC Brandon Aird of the 173rd Abn. Bde. share some of their photos capturing the Soldiers' work in Northern Iraq. 🇺🇸



SPC Brandon Aird

▲ During half-time at a soccer match, an Iraqi boy races across the field waving an American flag.

▶ The setting sun forms a backdrop for an artillery piece.

SPC Brandon Aird

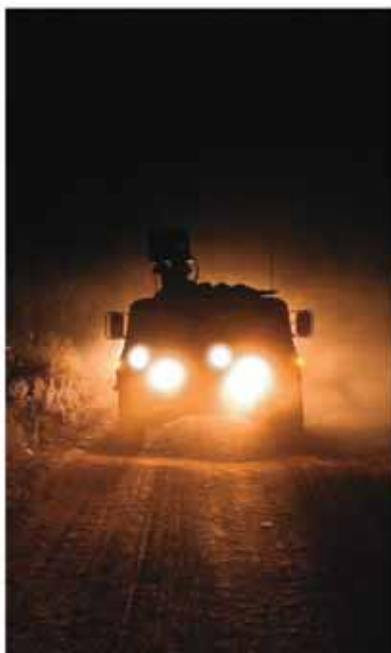




SFC Todd Oliver



▲ Soldiers search buildings in Kirkuk for weapons and ammunition.



SFC Todd Oliver

▶ A Humvee's lights pierce the night and swirling sand as Soldiers return from Operation Peninsula Strike.

SFC Brandon Aird



▲ Iraqi children celebrate the Soldiers' arrival in Kirkuk.

SPC Brandon Aird



▲ A SETAF Soldier provides security on Iraqi streets.

THE MILITARY'S OLDEST DECORATION

THE oldest official U.S. military decoration — the Purple Heart — is being given to thousands of Americans wounded or killed in Iraq.

George Washington created the Purple Heart in 1782, naming it the Badge of Military Merit. Washington wanted to honor Revolutionary War Soldiers for “Not only instances of unusual gallantry, but also of extraordinary fidelity and essential service in any way.”

Use of the Purple Heart declined after the Revolutionary War, during which only three Soldiers received the decoration. It wasn't until 1932 that the War Department announced the reinstatement and redesign of the award.

Today the decoration is given to service members who have suffered combat-related wounds that required treatment by a medical officer. — *U.S. Army Center of Military History*



Get Cash

SHARE YOUR IDEAS

HAVE an idea for the Army? Soldiers and Department of the Army civilians can now go online to offer their recommendations — and possibly win some cash.

The Army Suggestion Program seeks ways to improve work methods, materials, processes, equipment, logistics, utilities or tools that will benefit the Army. The suggestion must present a problem or situation, propose a solution and state the benefit to the government.

Implemented suggestions that save the Army money are often eligible for cash awards. The more money saved, the larger the potential award.

The Web site features a “save” function that allows users to fill out the submission packet over a period of time, rather than during just one session. It also allows supervisors to nominate a person for recognition as the top suggesters of the year in both Soldier and DA civilian categories. — *Army News Service*



The Army Suggestion Program, <https://armsuggestions.army.mil>, went online in May, and requires an Army Knowledge Online user name and password.

Tune In

SOLDIERS RADIO AND TELEVISION

KEEP up with Army news from your desktop. Soldiers Radio and Television offers up-to-date information that can help you manage your career, understand Army missions and connect with fellow Soldiers. SRTV products include:



Tune in at www.army.mil/srtv/soldiersradio/ or via the "Soldiers Radio Live" link at www.army.mil.



Soldiers Radio News — a five-minute radio newscast featuring Army news;

Sergeant's Time — a live-chat show featuring the Army's top enlisted leaders as guests;

Army Today — a magazine-format weekly feature;

News Note — a two-minute radio newscast;

Soldiers Radio Live — features music, Army news, interviews, live Pentagon and Department of Defense press briefings, and remote broadcasts from such special events as Army football games; and

Army Bandstand — features music from military ensembles. — *Soldiers Radio & Television*

Calling Card

HELP SOLDIERS PHONE HOME

HELP troops in contingency operations call home. The Department of Defense has authorized the Army and Air Force Exchange Service to sell prepaid calling cards to any individual or organization that wishes to purchase cards for deployed troops. The "Help Our Troops Call Home" program helps service members call from such areas as Kuwait, Iraq and Afghanistan.

Cards may be purchased for individuals at their deployed addresses or for "any service member" deployed or hospitalized. The American Red Cross, Air Force Aid Society and the Fisher House Foundation distribute cards addressed to "any service member."

Cards available through the program do not expire and there are no added charges or connection fees. — *Department of Defense PAO*



To donate a prepaid calling card, go to www.aafes.com. Click the "Help Our Troops Call Home" link.

Flag Patch

WHY REVERSE IT?

THE Stars and Stripes now grace the right shoulders of every Soldier in uniform. The U.S.



Code calls for the canton, the rectangle with the stars, to be positioned to the left. So why do Soldiers wear it reversed?

The tradition originated at a time when cavalry and infantry units had standard bearers who carried the colors into battle. During a charge the standard bearer's forward momentum caused the flag to stream backward. The canton, which flies closest to the pole, appeared on the right when seen from the right side of the passing formation.

Soldiers wear the flag in full color with camouflage uniforms because the U.S. Code dictates that the military use it so. — *USACMH*

ArmyHistory in August

Beyond its role in defense of the nation, the Army and its Soldiers have contributed to medicine, technology, exploration, engineering and science. The milestones listed in this monthly chronology offer only a small glimpse of that proud story of selfless service. It is also your story.



For more about Army history, go to www.ArmoryHistoryFnd.org and www.Armory.mil/cmh.

1700s

1781 — GEN George Washington fools the British into keeping their forces in New York City, then on Aug. 21 begins marching American and French forces south toward Yorktown, Va., where another British army, under Lord Cornwallis, is short of supplies.

1782 — Washington establishes the first American military decoration, the Badge of Military Merit. Made of purple cloth, its heart-shaped design is later used for the Purple Heart medal.

1789 — Under the authority of the new Constitution, Congress establishes the Department of War on Aug. 7.

1800s

1814 — Battle of Bladensburg, Aug. 24. Taking advantage of confusion among the poorly trained American leaders defending the approaches to Washington, D.C., British troops rout the predominately militia force. The British advance into the city and burn many public buildings.

1846 — The 1st Dragoon Regiment brings the town of Santa Fe, N.M., permanently under American authority. The regiment, with 1,700 troops under BG Stephen W. Kearny, had marched from Fort Leavenworth, Kan., at the beginning of the Mexican War, and entered Santa Fe on Aug. 18.



1847 — On Aug. 6 troops under LTG Winfield Scott begin their march inland to capture Mexico City. They break through Mexican defenses at Contreras and Churubusco on Aug. 19 and 20 to arrive at the city's final defenses.

1861 — On Aug. 28 a Union Army and Navy amphibious force under MG Benjamin Butler takes Fort Hatteras and Fort Clark, N.C., capturing more than 700 Confederates.

1862 — Battle of Cedar Mountain. Confederate GEN Stonewall Jackson's corps in the Shenandoah Valley attacks the Union's II Corps, Army of Virginia, on Aug. 9. A Union counterattack almost wins the day, but Jackson rallies his men and, with reinforcements, defeats the Union force.

1867 — Wagon Box Fight. On Aug. 2 a woodcutting detail of four civilians and 28 Soldiers from the 27th Inf. near Fort Kearny, Wyo., successfully holds off several hundred Sioux warriors for almost five hours. The men, armed with new breech-loading Springfield rifles and using their wagon boxes as a fort, inflict heavy losses on the Indians.

1869 — CPT Charles W. Raymond of the Corps of Engineers conducts a three-month exploration of the Yukon River Valley.



1777 — Battle of Bennington. The Vermont militia defeats a large Hessian force on Aug. 16, causing supply problems for the British forces advancing on Saratoga, N.Y.

1900s

1907 — On Aug. 1 the Signal Corps establishes an Aeronautical Division to supervise everything concerning "military ballooning, air machines and all kindred subjects."

1919 — Soldiers of the North Russian Expeditionary Force are withdrawn from northern Russia on Aug. 5 after almost a year of fighting the Bolsheviks.

1940 — The Army Parachute Test Platoon makes its first parachute jump at Fort Benning, Ga., on Aug. 16.

1943 — In Europe, Paris is liberated on Aug. 25.



1903 — LTG Samuel B.M. Young is sworn in on Aug. 16 as the first chief of staff of the Army. Prior to this the Army's senior position was "commanding general." Changes in the Army's structure are a result of reforms proposed by Secretary of War Elihu Root.



1945 — On Aug. 6 the U.S. Army Air Force drops an atomic bomb on Hiroshima, Japan. A second bomb is dropped on Nagasaki three days later. The Japanese government accepts Allied surrender terms on Aug. 30.

1948 — General of the Army Omar Bradley is appointed as the first chairman of the Joint Chiefs of Staff on Aug. 16.

1950 — Army helicopters conduct the first medical evacuation of the Korean War, on Aug. 4.

1955 — The Civil Affairs/Military Government Branch is established in the Army Reserve, Aug. 17. The name is changed in 1959 to the Civil Affairs Branch.

1972 — The 3rd Bn., 21st Inf., the last Army ground-combat unit in South Vietnam, is inactivated on Aug. 23, ending the Army's ground role there.

1990 — On Aug. 9 the 2nd Bde., 82nd Airborne Div., arrives to set up defensive positions in Saudi Arabia. This is the first Army ground element deployed in response to the Iraqi invasion of Kuwait.

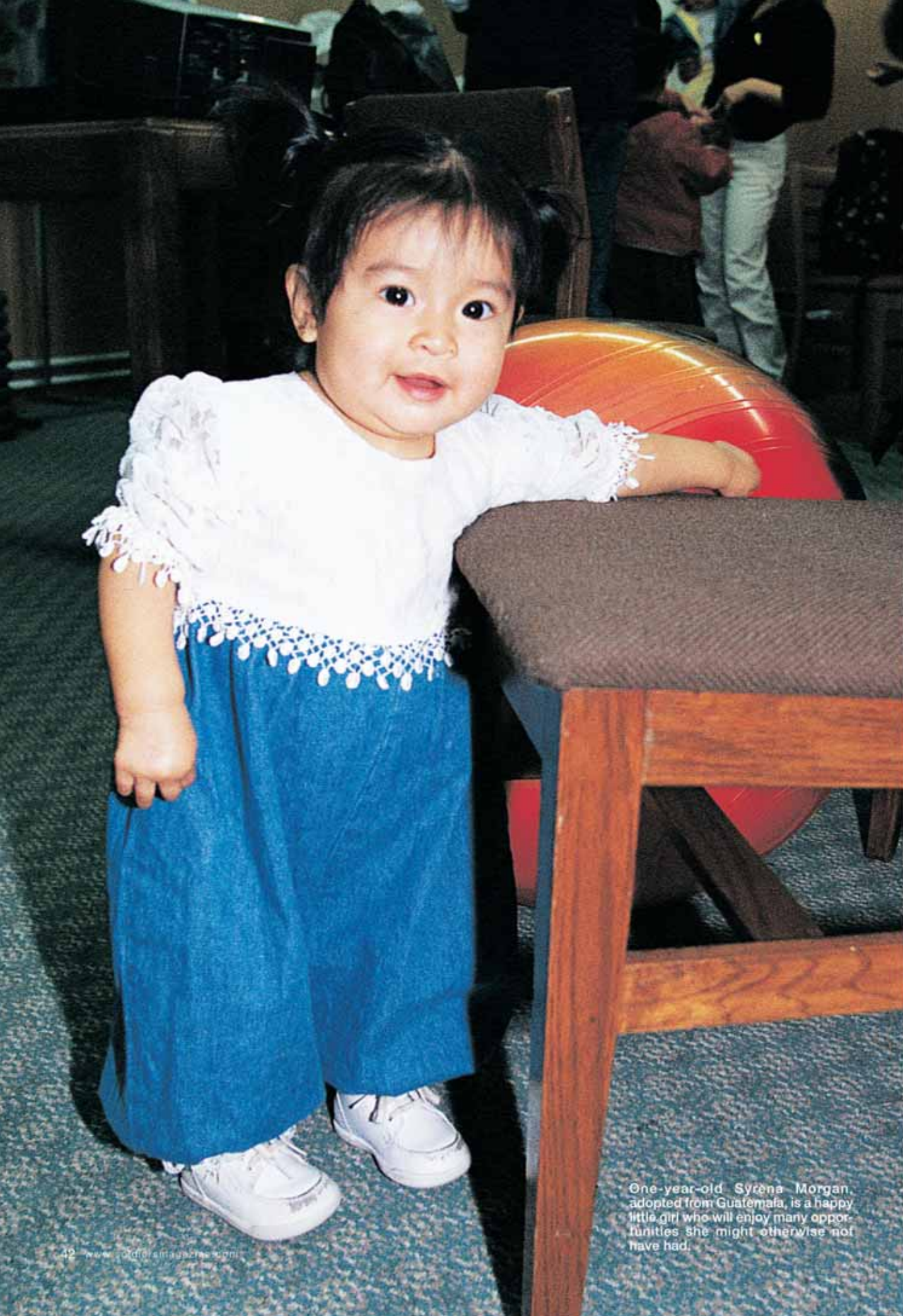
2000s

2002 — Elements of the 82nd Abn. Div., 75th Ranger Regt. and Army aviation units conduct Operation Mountain Sweep, Aug. 18 through 26, in Afghanistan. Soldiers capture several suspected Taliban guerrillas and weapons caches.

2003 — Nearly three years after retiring from active duty, GEN Peter J. Schoomaker is sworn in on Aug. 1 as the Army's 35th chief of staff.



1968 — On Aug. 28 National Guard and active-duty Soldiers are called in to restore order during the Democratic National Convention.



One-year-old Syrena Morgan, adopted from Guatemala, is a happy little girl who will enjoy many opportunities she might otherwise not have had.

Adoptive Parents

Story and Photos by Heike Hasenauer

THE little girl waddles around a wooden chair, squealing as she comes nose to nose with her mother, Marelle Morgan, a single mom and teacher with the Department of Defense Dependent School System in Ramstein, Germany.

Morgan's face lights up as the pint-sized bundle of energy — the 1-year-old she adopted from Guatemala — comes near.

Somewhere in the Central American country, the little girl's biological mother might be thinking about her — but maybe not, she already had eight children to care for and scarcely the resources to do so, said Morgan, who named the girl Syrena, after the girl's great grandmother.

"I knew from the time I was a little girl that I wanted to adopt a child," Morgan said. "When I did, it was the right time, in all aspects of my life."

Carrie Onellion experienced motherhood as few women do, even as adoptive mothers. One day she had no children, the next day she had three.

"My husband [Chaplain (CPT) Damon Onellion] was in Iraq," she said. "He's assigned to Headquarters and HQs. Company, 1st Armored Division, in Baumholder, Germany."

The couple adopted three siblings

from Hungary in November 2002; he deployed to Iraq in April 2003.

"We had been married for 18 years and were unable to have children of our own," Carrie said. The couple worked through an independent Hungarian adoption facilitator named Maria, who lives in California.

The process started with a youth minister in Romania, who met with a chaplain in Turkey, who knew someone in Hungary, Carrie said. Basically, word of mouth netted results.

"We sent our first e-mail to Maria in 2001," Carrie said. "She replied: 'It's a slow process to adopt an infant. Would you consider adopting three siblings?'"

The children's parents had four other children, and "people in Hungary wouldn't consider adopting the three children in question, because they were of Gypsy origin," said Carrie, who later returned to the orphanage and learned that their mother had had yet another baby.

"Our home-study representative said there was no way we could adjust to suddenly having three children," Carrie said. She and her husband proved them wrong.

Hungary requires that prospective adoptive parents, under supervision



"People don't realize how many adoptions there are here in Europe."

from social work officials, live in their country for six weeks to bond with the children they wish to adopt, Carrie said. "So, basically, after a year-long 'pregnancy' and a six-week 'birth,' we returned home with three bouncing children."

Only a mother who has given a child up for adoption can know the mental anguish associated with such a decision, said Air Force Maj. Teresa Roberts, assistant chief of Social Work Services at Landstuhl Regional Medical Center in Germany.

Roberts said when a mother makes the decision to give up a child, she's most often thinking about the child's welfare.

"Typically, a mother will give up a child because she wants to give the child more than she feels she can give," Roberts said. "Often it boils down to 'my keeping the baby isn't in the baby's best interest.'"

"People don't realize how many adoptions there are here in Europe," said Jeanie Veith, an adoption-support volunteer with the Landstuhl American Red Cross Adoption Support Group, the only one of its kind in Germany (there are several commercially affiliated adoption-support groups in the country).

"Each year about 100 babies born at Landstuhl and other hospitals are adopted, and some 200 to 300 other children

"Each year about 100 babies born at Landstuhl are adopted by military and civilian Defense Department personnel."

are adopted from the United States and other countries by military and civilian Defense Department personnel overseas," Veith said.

Hospital officials encourage the birth mother to meet with Roberts as soon as possible if the mother wants to place the child for adoption, Roberts said. "I want to make sure the mother doesn't do this for the wrong reasons. I don't want someone to feel

they have no other choice, due to financial constraints, for example," she said.

Adoption laws protect the mother by typically requiring her to wait 72 hours after the child is born before signing paperwork legalizing her decision to relinquish her child for adoption, Roberts said. The actual time limitations depend on the state through which the adoption is processed.

Roberts then ensures that the women who choose the adoption option — among them adolescent dependents, active-duty single Soldiers and wives of military personnel — know they're eligible for a full range of hospital services.

"I make sure the mother feels comfortable with the hospital staff and doesn't feel she's being scorned because of her decision," Roberts said.

"We want women who are pregnant — and couples who are expecting a child — to know they have an option," Roberts continued. "We're here to help if they need us."



► Carrie Onellion poses with her three adopted children — Robert, Margot and Alanna — and a family photo that includes her deployed husband.

The military doesn't technically handle adoptions. "We don't handle the paperwork; it's handled through courts in the States. But we support the people who are going through the process," Roberts said.

She said she's a referral source, to help mothers understand and be comfortable with the decision they're making before they give a child up for adoption. She also helps prospective adoptive parents work through legal requirements.

Prospective parents overseas must meet the same requirements to adopt a child as prospective adoptive parents do in the United States, she said. Even for international adoptions by U.S. personnel outside the United States, paperwork has to go through the United States. There have to be background checks and home studies.

"The duration of the process depends on the policies of the country involved," Roberts said, and can take anywhere from four months to a year to complete.

The good news is that U.S. agencies will accept home studies and background checks that have been conducted by approved social services personnel overseas, Roberts said.

Morgan submitted a portfolio to an adoption agency in July 2002. It included a background check, financial study and home study. She had the latter completed by a U.S. social worker for the U.S. Immigration and Naturalization Service in Frankfurt, Germany. An officer within the Office of the Judge Advocate General in Landstuhl notarized the papers.

Those were then sent to the U.S. State Department in Washington, D.C., to the Guatemalan embassy and, finally, the adoption agency, Morgan said.

In October 2002, Morgan was notified that a girl had been born in Guatemala who needed a home. Guatemala was the country to which she had applied to adopt a child.

"Officials there sent pictures of the little girl and a doctor's report," Morgan said. "I signed a paper of intent — indicating I wished to adopt her."

From that point, the Guatemalan court system became involved. When the baby was nearly 3 months old, Morgan visited the orphanage, a requirement under that country's law.

"Then in May 2003, I was told I could come and get her and the adoption would be finalized," Morgan said.

While some U.S. families in Germany have adopted children from the States through child protective services organizations with almost no fees involved, Roberts said legal fees are almost always part of an adoption. Some fees run as much as \$35,000, when international as well as U.S.

◀ Dennis and Susi Kuhn adopted their daughter Natasha, here at 11 months old, from the United States two months after she was born.



legal fees and air fares are included.

That's when the adoption-support unit can help steer prospective parents in the right direction.

The Landstuhl chapter of the American Red Cross sponsors the group, although it's not an official Red Cross program, Roberts said.

Some 60 volunteers, all affiliated with active-duty military personnel in Germany, have their own Web site: www.usadopteurope.com, and they hold a symposium every year in May with attendees coming from military bases and U.S. embassies in other European countries, including England, and from as far away as Egypt.

Roberts said that after an adoption is complete, the group supports adoptive parents in a number of ways, from answering questions about birth records and the adopted child's files to recommending how and when adoptive parents should tell their children they were adopted.

"Some parents know a lot about both of their child's birth parents," Veith said. "Others know very little. Everyone walks his own road; every adoption is different. We're here to help both the adoptive parents and those who choose to give their child up for adoption."

The bottom line is that members of the Landstuhl Adoption Support Group want to help ensure that children who arrive in their part of the world — whether by birth or adoption — receive the love and nurturing they will need to grow into healthy, happy adults, Veith said. 🇺🇸



Staying

Story and Photos
By MSG Lisa Gregory

THE western U.S. coastline, the open roads of the Midwest, the winding northern mountain roads, and the Appalachian Trail of the east coast are all invitations to ride for adventurous travelers on two wheels.

According to the National Highway Traffic Safety Administration, there are currently four million motorcycles registered in the United States. Current figures from the Army and Air Force Exchange Service show that almost 2,000 Soldiers deployed to Iraq and Afghanistan in support of operations Iraqi Freedom and Enduring Freedom will add to those already on the road when they return home.

Deployed Soldiers can purchase vehicles through AAFES and their motorcycles can be waiting when they get back. Owning a motorcycle is a little like owning a car, but with a slightly different set of rules.

"Motorcycles need to be registered on post, just like cars," said Patricia Borel, the Fort Belvoir, Va., installation safety specialist. "But to do that, the owner must have a Motorcycle Safety Foundation card. All riders get one after completing a motorcycle-safety course."

The training includes practical experience to develop basic road skills, as well as classes on rules of the road and proper safety equipment.

"Here at Fort Belvoir we offer a refresher course for more experienced riders. Some installations offer basic courses, but riders need to have the MSF cards in order to register their bikes on post. Most motorcycle owners will take the course at a local school or through the dealership," Borel said.

The Motorcycle Safety Foundation has been offering basic and advanced riding courses since 1973 at civilian and military sites across the United States.

"I highly recommend a safety course to anyone getting on a motorcycle, whether as a beginner or experienced rider," said

SFC Lisa Gregory

Safe on 2 Wheels

CSM Earnie Holifield (Ret.). "It's been a few years since I took the course. It was a requirement at every post I went to, so I eventually took the instructor courses as well."

The MSF focuses on five main messages to ensure motorcyclists enjoy their ride. The first begins with training. Currently the MSF works with safety coordinators at approximately 150 military installations. If a military base doesn't offer a beginner-rider course, the safety officer can point motorcyclists to a location that does.

Riders should also be licensed to ride a motorcycle. A motorcycle license requires a separate test at each state's motor vehicle office. A license, along with an MSF card, is required to register a motorcycle on a military installation.

As most seasoned riders know, there are a few wardrobe requirements that have to be met before getting on a motorcycle. The most important is the safety helmet. Riders should be aware that in many states wearing a safety helmet is required by law. It's also important to take time to find the right type of helmet. New riders should make use of the consumer information available through the NHTSA and other organizations before choosing safety helmets.

Eye protection, gloves, footwear, jackets and long pants are equally important items for riding. According to the NHTSA, these items not only help protect the rider from the elements, but can aid in reducing injuries in accidents.

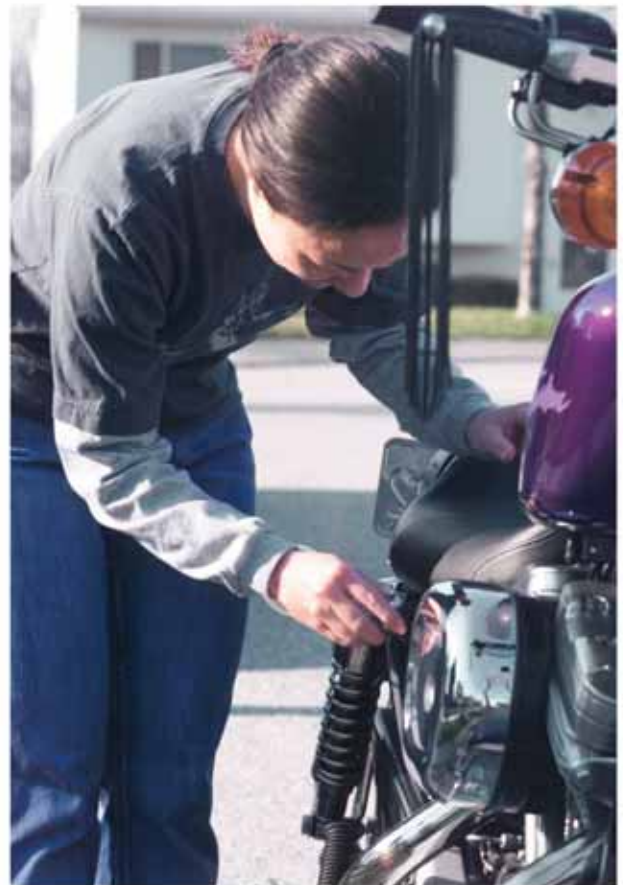
Even with the basic motorcycle training, proper license and the right gear, there are still pitfalls that every rider should be aware of. The MSF focuses on making riders aware of their own limits.

"When I took the course, I first studied the owner's manual," said Holifield. "That way I knew my bike, what it was capable of and what service it required."

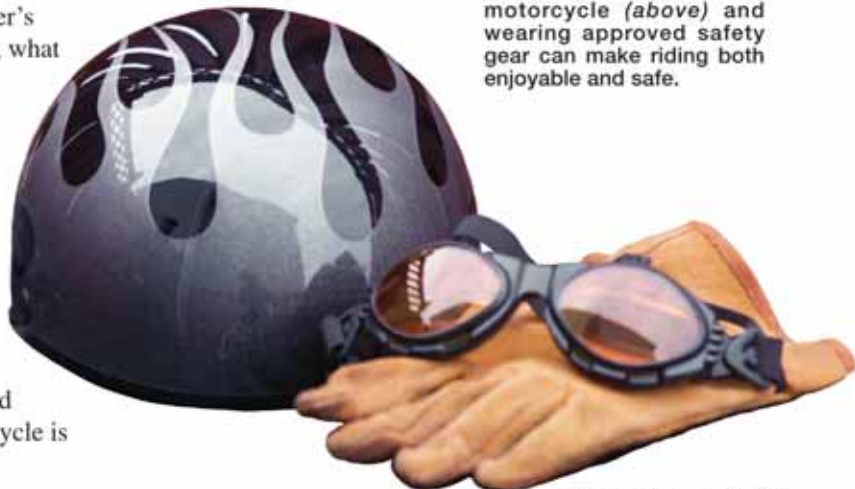
For those learning to ride for the first time, the course begins with learning about the motorcycle and basic riding skills.

The final message the MSF wants to get across is the danger of driving while on alcohol and drugs. According to the MSF, not only is it against the law to drive while intoxicated, it's extremely dangerous for the rider and others on the road.

For motorcyclists, choosing to ride instead of drive is a personal choice. But being safe on the road and having the proper equipment while on a motorcycle is not a choice, but a requirement. 🚒



Proper maintenance of the motorcycle (above) and wearing approved safety gear can make riding both enjoyable and safe.



Shoes for Afghanistan

BASEBALL in bare feet — the thought sends an ache to **Amy Poklar's** soles. So when a cousin wrote to her from Afghanistan describing local children running over gravel without shoes, Poklar sprung to action.

"I'd never imagined that there were people without shoes to wear. It's something we take for granted," she said. "Many of us have a different pair of shoes for every outfit."

Last fall the 16-year-old from Chagrin Falls, Ohio, collected 850 pairs of shoes for the people of Afghanistan. She then mailed the shoes to her cousin, MAJ Timothy Owen of the 321st Civil Affairs Brigade, who shared them with local Afghans.

"The kids were overjoyed with the shoes. Their feet were as rough as lizard skin," he said. "And even though most of the adults had shoes, most were either torn or the wrong size. A lot of the women wore men's shoes."



"I'd never imagined that there were people without shoes to wear. It's something we take for granted."

While years may pass before the people of Afghanistan associate paved roads and prosperity with American Soldiers, the shoes inspired the locals' gratitude.

"This made me feel like I was helping our Soldiers by reinforcing the fact that Americans are friendly and want to help rebuild Afghanistan," Poklar said.

She spent two months gathering the shoes at local car dealerships that allowed her to place collection boxes in their showrooms. During her Christmas break she sorted and cleaned the shoes in her family's garage.

A local moving company gave Poklar 50 boxes, which she stuffed with baby shoes, men's work shoes, loafers and Poklar's favorite — pink tennis shoes with lights that flicker with the wearer's steps. She waitressed to earn money for shipping costs, and some funds came from her parents.

"I'm not one of those people who can just sit back and watch things happen on TV. I need to do something to help," Poklar said. "My friends seemed to think I was crazy for spending so much time on the project, but they did help by donating shoes."

Poklar's life has been heavily influenced by the military. She has a brother at the Citadel, a friend who is a Navy SEAL, cousins in both the Army and Marine Corps, an uncle who fought in Vietnam and a grandfather who was in the Korean War.

While a military career may loom in Poklar's future, for now she's content to praise Soldiers deployed overseas.

"I think Soldiers are the coolest people, and I look up to them a lot," she said. "What they do is really amazing. How many people can say they defend America's freedom?"



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ARMY TO FIND THEMSELVES.
SOME END UP FINDING
A WHOLE FAMILY.**



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AN ARMY OF ONE



U.S. ARMY

There are thousands of good reasons to reenlist. SPC Christopher Webb did it for the camaraderie. Having grown up as a foster child, he never was a part of anything that lasted. But the family he's found in the Army changed that. He's got true brothers now. And if any of them have to be out there in the field, the only place he wants to be is right there with them.

TALK WITH YOUR CAREER COUNSELOR TODAY ABOUT HOW TO ACHIEVE YOUR GOALS